



02-08-07

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AMENDMENT TRANSMITTAL LETTER

Docket No.
11345/040001

Application No. 10/038,859-Conf. #6371	Filing Date January 3, 2002	Examiner J. E. Shepard	Art Unit 2623
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Applicant(s): Jean-Claude Sarfati et al.

Invention: METHOD AND DEVICE FOR ADMINISTRATING INFORMATION IN AN INTERACTIVE COMMUNICATION SYSTEM

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	6	- 20 =		x	
Independent Claims	2	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					120.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					120.00

 Large Entity Small Entity No additional fee is required for this amendment. Please charge Deposit Account No. 50-0591 in the amount of \$ _____ A check in the amount of \$ _____ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge and credit Deposit Account No. 50-0591 as described below. Credit any overpayment. Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Dated: February 7, 2007

Jonathan P. Osha
Attorney/Agent Reg. No.: 33,986OSHA · LIANG LLP
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PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032

FEE TRANSMITTAL

For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

Effective on 12/08/2004. <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known		
<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">For FY 2006</h2>		Application Number	10/038,859-Conf. #6371	
		Filing Date	January 3, 2002	
		First Named Inventor	Jean-Claude Sarfati	
		Examiner Name	J. E. Shepard	
		Art Unit	2623	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				
TOTAL AMOUNT OF PAYMENT	(\$)	120.00	Attorney Docket No.	11345/040001

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-0591 Deposit Account Name: _____ Osha · Liang LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
6	- 20 =	x	=	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

HP = highest number of total claims paid for, if greater than 2.
Indep. Claims Extra Claims Fee (\$) **Fee Paid (\$)**
2 - 3 = _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE
 If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 100 = _____	/50 _____	(round up to a whole number) x	_____	= _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

SUBMITTED BY JOHN DOE

Signature		Registration No. (Attorney/Agent)	33,986	Telephone	(713) 228-8600
Name (Print/Type)	Jonathan P. Osha			Date	February 7, 2007

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Application No. (if known): 10/038,859

Attorney Docket No.: 11345/040001

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV943707201US, in an envelope addressed to:

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on February 7, 2007
Date

Debra V. Wieser

Signature

22511

Debra V. Wieser

Typed or printed name of person signing Certificate

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(713) 228-8600

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Amendment Transmittal Letter (1 page)
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Fee Transmittal (1 page)
Payment by credit card; Form PTO-2038 is attached (1 page);
charge \$120.00 to credit card
Reply Under 37 C.F.R. § 1.111 (9 pages)
Return Receipt Postcard (1 page)